## FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076 Est, time per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT
[Please read instructions before completing and for Notice regarding public burden.]

SECTION 1 - General Information  1. Name and Mailing Address of Respondent	tion of Resp	ondent			:		***************************************									
Ellensburg Telephone Company, a subsidiary of FairPoint Communications, Inc. 305 North Ruby Street, P.O. Box 308, Ellensburg, WA 98926	. μ (3, μ) (4, μ)	ompany O. Bo:	, a subsid x 308, EII	liary of Fa	urPoint C WA 9892	6	ations, In	ն						Check has a char address.	Check here if this is a change of address.	
2. Year Report Filed			3. Reporting Period Co	Reporting Period (Ending Date of Pay Period Covered by Report)	ng Date of Par	×		4. Number of Reporting	(Full-Time En	nployees durk ( one);	ng Selected				:	
2017			2/13/17	17				호텔. <u>조</u>	E. Fewer than 16 (complete Sections I, IV, and V only)     B. 16 or more (complete all sections)	omplete Secto	ions I, IV. and	V only)				
SECTION II - Full-Time Employees.	- Names							Name of the last o	has of Emplo							
	ı							Numi Report emplo	Number of Employees (Report employees in only one category)	yees one category)						
Job	1							7	Race/Ethnicity							
Categories		Hispanic or	nic or						Not-Hispanic or Latino	c or Latino						Total
	<u> </u>	La <sub>e</sub>	BIO			Male	aic					Female	æle			Columns A-N
		Male	Female	White	Black or African	Native Hawaiian or	Asian	American Indian or	Two or more	White	Stack or African	Native Hawaiian or	Asian	American Indian or	Two or more races	
						Other Pacific Istander		Alaska Native				Other Pacific Islander		Alaska Native	· · · · · · · · · · · · · · · · · · ·	
		>	83	၁	0	m	'n	ေ	I	•	د	×	٢	Z	z	0
Executive/Senior Level Officials and Managers	==													:		0
First/Mid-Level Officials and Managers	12			3						2						5
Professionals	'n															0
Technicians	ω			2												လ
Sales Workers	4			1												1
Administrative Support Workers	S.									4						4
Craft Workers	đ			15						مبو						16
Operatives	7															0
Laborers and Helpers	∞															0
Service Workers	ဖ			ı		÷					1					0
TOTAL	ö	٥	0	21	o	٥	0	0	٥	7	٥	٥	٥	·o	o	ಜ
PREVIOUS YEAR TOTAL	⇉	1	0	23	0	0	0	0	0	7	0	0	0	0	0	31

FCC 395 Revised December 2007

SECTION III - Part-Time Employees.	ş														
							Numi Report emplo	Number of Employees (Report employees in only one category)	/ees ine category)						
j.							'n	Race/Ethnicity							
Categories	Hispa	Hispanic or						Not-Hispanic or Latino	c or Latino						Total
	<u></u>	56			Male	le					Female	مند			Columns A-N
	Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more	While	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	
	Þ	В	ი	o	m	ካ	၀	I		د	×	ı	ĸ	z	٥
Executive/Senior Level 1.1 Officials and Managers															0
First/Mid-Level Officials and 1.2	,														0
Professionals 2															0
Technicians 3								·							0
Sales Workers 4											ı				٥
Administrative Support 5 Workers															0
Craft Workers 6													-		0
Operatives 7															0
Laborers and Helpers 8	<del>-</del>														0
Service Workers 9															0
10TAL 10	Ó	0	0	0	0	0	0	0	0	0	0	٥	0	0	٥
PREVIOUS YEAR TOTAL 11	0	0	0	0	0	0	0	Ō	0	o	0	0	٥	0	٥
SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.168, 101.4, and 191,311.	nation Comp	laints Pursus	int to 47 CFR	22.321, 23.5	s, 90.168, 101	A, and 101.3	11.								
This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report.	Commission the	at no complai ompetent juris	nts regarding diction in sucl	violations of t h matters duri	he equal empl	loyment provi ar year coven	sions of Fede ed by this rep	ral, state, terri ort	itorial, or local	l statutes hav	o been filed a	gainst this			

ENPa Chief Financial Officer SECTION V - Certification

Section I contify that to the best of my knowledge, information, and belief, all statements in this report are true and correct.

Date Typog or Printed Name of Person Signing Sighature Trailes V 1 never WILLFULLY FALSE STATEMENT'S MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503). Telephone No.

This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company.

(Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition.